Under the Paperwork Reduction And of 1885, his persons are required to respond to a collection of Information unless it displays a yello OMB control number. Application of Dooker Number APPLICATION AS FILED - PART ! (Opluma 1) OTHER THAN SMALL ENTITY (Colymn 2) SMALL BUTITY PR. FOR **HUMBER FILED** BABIO FEE (AT OFR 1, Is (a), (b); or (c)) NUMBER EXTRA RATE (\$) FEE (\$) · N/A RATE (\$) N/A FEE (\$) BEARCH FEE · NA N/A N/A NA EXAMINATION FEE N/A N/A AVA. WA: TOTAL CLAIR N/A 07 OFR 1.16(1) NA minus 20 = INDEPENDENT CLAIMS BY OFR 1.15(N) EB: = OR minus s 50 If the specification and drawings exceed 100 x 105 = 200 = sheets of paper, the application size lee due APPLICATION BIZE steels of paper, the application see the less than 16 \$250 (\$130 for small entity) for each additional 50 sheets of fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 OFR 1:18(s). (27 CFR 1.16(3)) MULTIPLE DEPENDENT CLAIM PRESENT (87 CFR 1.18(1)) 185 If the difference in column (is less than zero, enter *6* in column 2. 370 TOTAL PPLICATION AS AMENDED - PART II TOTAL (Column 1) (Column 2) (Column 3) OTHER THAN. SMALL ENTITY CLAIMS REMAINING AFTER SMALL ENTITY HIGHEST NUMBER PRESENT PREVIOUSLY ŘATE (\$) -ADDI-RATE (\$) WENDWENT PAID FOR ADDL: trolal TIONAL Minus FEE (\$) hatependent from Littin 25 ÖR. Minus x 50 Application Size Feb x 105 = (a) CFR 1.16(s)) 210 **OR** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(II) 186 370 OR: TOTAL ADD'L FEE TOTAL ADD'L FEE OR (Column 1) (Column 2) (columnia) CLAIMS REMAINING HIGHERT NUMBER PREVIOUSLY PRESENT EXTRA AFTER MENDMENT RATE (\$) ADDI-ADDI-TIONAL FEE (\$) RATE (\$) TIONAL FEE (\$) PAID FOR to of the Minus independent by officially. x 25 Minus x 50 O'R' 105 Application 8 the Fee (37 CFR 1.16(5)) x 210 .= OR. EMET PRESENTATION OF MULTIPLE DEPENDENT CLAIM (ST OFR 1.160) 185 ОŔ TOTAL ADD'L FEE

If the entry in column 1 is tess than the entry in column 2, write of the column 3.

If the Highest Number Previously Paid For in This space han 20, enter 20.

The Highest Number Previously Paid For in This space han 20, enter 20.

The Highest Number Previously Paid For in This space han 20, enter 20.

The Highest Number Previously Paid For in This space han 20, enter 20.

This collection of Information b'required by 37 CFR 1.16. The Information is required to obtain or retain a periodic by the public which is to file fand by the united of process an application. Confidentially is governed by 35 U.S.O. 122 and 37 CFR 1.14. This collections is the public which is to file fand by the industry of the individual case. Any compeleted application to the unound of time you require to complete this form and/or suggestions for reducing his burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

((you need assistance in ∞mpletting the form, ball 1-800-PTO-9160 and select option 2.